DECLARATION	N FOR UTILITY OR	Attorney Docket Nur	nber TRAN	IS 3.0-037			
	ESIGN	First Named Invento	r Todd	Todd Fijeld			
	APPLICATION	COMPLETE IF KNOWN					
(37 C	FR 1.63)	Application Number	Not Yet Ass	signed			
X Declaration	i mig (sarataige	Filing Date Herewith					
Submitted Swith Initial OR		Group Art Unit Not Yet Assigned					
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	Not Yet Assigned				
	eventor, I hereby declare to						
·	I, first and sole inventor (if only	-		rst and joint inventor (if plura			
ames are listed below)	of the subject matter which is c	laimed and for which a pat	ent is sought on	the invention entitled			
the specification of wh		Title of the Invention)					
x is attached here	rto						
X is attached here OR was filed on (MM		as United States	Application Nu	imber or PCT International			
OR	M/DD/YYYY)	as United States	··				
OR was filed on (MM Application No.	M/DD/YYYY) and w	ras amended on (MM/DD	/////) [(ıf applıcabl			
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OR was filed on (MM Application No. hereby state that I have imended by any amendr acknowledge the duty t continuation-in-part application or PCT interr hereby claim foreign printers or plant breede country other than the Ur application for patent, investor that of the application	and was reviewed and understand the ement specifically referred to about disclose information which is cations, material information wi	ras amended on (MM/DD contents of the above identity of the above identity as the first part application. 19(a)-(d) or (f), or 365(b) or (a) or (f) or any PCT international is certificate(s), or of any PC	YYYYY) Idefined specification Idefined in 37 (Idefined in 37 ((If applicable) on, including the claims, as CFR 1.56, including for late of the prior application a opplication(s) for patent, lich designated at least one necking the box, any foreign			
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U.S. Patent and Tradomark Office, U.S. DEPARTMENT OF COMMERCI.								
DECLARATION — Utility or Design Patent Application								
POWER OF ATTORNEY: As a named inventor, thereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Frademark Office connected therewith. Customer Number 000530								
Direct all correspondence to X Customer Number or Bar Code Label *000530* OR Correspondence eddress below								
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Address	Address							
City			State	ZIP				
Country	Talanhana							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may peopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:	NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])	Todd		Family Name or Surname	Fjield				
inventor's Signature				Date				
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X Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

X Additional inventors are being named on the

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	DECLAF	RATION	— Utili	ty or	Des	sig	n Pat	ent	Application	
POWER OF A	ATTORNEY As a rusiness in the Paten	amed inventor, t and Trademan	I hereby appoint c Office connect	t the follow ed therewi	ing re	gistere istome	ed practition er Number	ner(s) to 000530	o prosecute this applicatio	on and to
Direct all corre	espondence ta.		er Number Code Label	*00	000		0*	OR	Correspondence a	address below
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NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name Todd Family Name Fjield (first and middle [if any])										
Inventor's Signature	a Took	ect	well	?				Date	11/12/20	201
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Inventor's Signature								Date		
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Mailing Address:	67 Meeting	House Roa	ad							
City	Duxbury		MA State	ZIP	02	332		Cou	untry	

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1				
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor				
Given Name (first and middle [if pag]) Patrick David				Family Name or Surname	Lopath			
Inventor's Signature				Date 12 NOV 2001				
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Inventor's Signature				Date				
Residence: City	esidence: City State Country			Citizenship				
Malling Address:								
City State ZIP					Country			
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Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature			Date					
Residence: City State Country		ntry	Citizenship					
Mailing Address:								
City	State	ZIP			Country			
Name of Additional Joint Invento	or, if any:			A petition i	nas been filed for this unsigned inventor			
Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature				Date				
Residence: City			ntry		Citizenship			
Mailing Address:								
City	State ZIP				Country			